Practitioner's Docket No. 1945/A47AUG

IN THE UNITED S ENT AND TRADEMARK OFFICE

application of:

Rothschild Lee Grodzins

cation No.: 10/750,178

Group No.: 3663 Examiner: Mondt, J.

12/31/2003

Detection of Neutrons and Sources

of Radioactive Material

Mail Stop Amendment **Commissioner for Patents** P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

Transmitted herewith is an amendment for this application. Also enclosed is an Information 1. Disclosure Statement.

STATUS

Applicant is a small entity. 2.

EXTENSION OF TERM

The proceedings herein are for a patent application and the provisions of 3.7 C.F.R. 1.136 apply. 3. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for three months:

Fee:

\$510.00

CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a) and 1.10*

(When using Express Mail, the Express Mail label number is mandatory; Express Mail certification is optional.)

I hereby certify that, on the date shown below, this correspondence is being:

MAILING

[X] deposited with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

37 C.F.R. § 1.10*

[X] with sufficient postage as first class mail.

as "Express Mail Post Office to Addressee"

Mailing Label No.

(mandatory)

TRANSMISSION

☐ facsimile transmitted to the Patent and Trademark Office, (571) 273 - 8300.

Date: August 3, 2006

Samuel J. Petuchowski

(type or print name of person certifying)

^{*} Only the date of filing (§ 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under § 1.8 continues to be taken into account in determining timeliness. See § 1.703(f). Consider "Express Mail Post Office to Addressee" (§ 1.10) or facsimile transmission (§ 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)	(C	ol. 2)	(Col. 3)		SMALL ENTITY					
	CLAIMS										
	REMAINING	HIGH	EST NO.								
	AFTER	PREV	IOUSLY		ESENT					ADDIT.	
	AMENDMENT	PAID FOR		EXTRA		RATE				FEE	
TOTAL	63		63	=	0	x	\$_	25.00	=	\$	0.00
INDEP.	6		6	=	0	х	\$_	100.00	=	\$	0.00
THOT TRUBENTITION OF MODIFIED DESCRIPTION								0.00	=	\$	0.00
								TOTAL			
							Αľ	DDIT. FEE		\$	0.00

No additional fee for claims is required.

FEE PAYMENT

5. Authorization is hereby made to charge the amount of \$690.00 to Deposit Account No. 19-4972, including \$180 fee for Supplemental Information Disclosure Statement.

Charge any additional fees required by this paper or credit any overpayment in the manner authorized above.

FEE DEFICIENCY

6. If any additional extension and/or fee is required, charge Account No. 19-4972.

If any fee for claims is required, charge Account No. 19-4972.

Date: August 3, 2006

Samuel J. Petuchowski Registration No. 37,910

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